

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1408
Logged In	
Scanned	
Computer	WKS
Audited	7-25-05

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Bill Schickel

JUL 21 2005 PM 7:19

IMPORTANT: Indicate by # type of committee you are reporting for:

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
 Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Bill Schickel

Political Party (if applicable)

Republican

Office Sought

State Representative

District (if Senate or House)

HD-13

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

AM FILING A

Oct. 15 - Tues. prec. gen. election

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # 1

☒ CHECK IF AMENDMENT TO REPORT DATED above
☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 19,708.83

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

19,600.83

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

39,309.66

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

22,292.15

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

17,017.51

**UNPAID BILLS (From Schedule D - Attach Schedule D)

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

4,500.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☐ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization) <u>Citizens for Bill Schickel</u>		IA ETHICS & CAMPAIGN DISCLOSURE BOARD NOV 1 2004 pm FILED 10-29	FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
IMPORTANT: Indicate type of committee you are reporting for: <input checked="" type="checkbox"/> 1			Use Only Indexed <u>SW</u> Edited <u>1408</u> Computer	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates				
SIGNATURE OF TREASURER (or person filing this report) <u>X Dennis L Wilson</u> TELEPHONE <u>641-423-5328</u> DATE SIGNED <u>10/28/04</u>				

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A Oct. 15 Thurs. preceding ^{general election} REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate one ☒ 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

\$ 19,631.29

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A).....

19,600.83

Schedule F: Loans Received total (Attach Schedule F).....

Schedule H: Total Sales of Campaign Property (Attach Schedule H).....

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 39,232.12

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B).....

22,292.15

Schedule F: Loan Repayments total (Attach Schedule F).....

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3).....

\$ 16,939.97

UNPAID BILLS (From Schedule D - Attach Schedule D).....\$

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$

4,500.00

OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

___ YES ___ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ _____

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Bill Schickel

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/18/04	ID# 8251 CK# 1377	Prion PAC 711 High St. Des Moines, IA. 50392		\$ 500.	
10/20/04	ID# 6082 CK# 1072	MidAmerican Energy Co. Effective Govt Committee 666 Grand Ave. PO Box 657 Des Moines, IA. 50303-0657		500.	
10/20/04	ID# 6087 CK# 1392	IA. Telecommunications Industry PAC 2987 100th St. Urbandale, IA. 50322-5501		500.	
10/21/04	ID# 8442 CK# 1106	The Hawkeye PAC 3400 Woodman Ln. Alexandria, VA 22309		17,500.	
10/21/04	ID# 6300 CK# 5175	Foreway Stores, Inc. PAC 2600 E. 8th St. Des Moines, IA. 50036		250.	
10/22/04	ID# 6430 CK# 1323	IA. Rural Water State PAC 4221 S. 22nd Ave. E Newton, IA. 50208		100.	
10/22/04	ID# 6237 CK# 1719	ABATE PAC 3118 Eastern Ave. NE Cedar Rapids, IA. 52402		250.	
10/15/04	ID# CK#	US Bank interest on account Mason City, IA. 50401		.83	
	ID# CK#				
	ID# CK#				

SUB-TOTAL

\$19600.83

TOTAL (if last page of this schedule)

\$19,600.83

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE
B
(Rev. 09/97)

MONETARY
EXPENDITURES

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Bill Schickel

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/15/04	ID# CK# 1118	Postmaster Mason City, IA 50401	post cards	\$ 817.50
10/18/04	ID# CK# 1119	KIMT-TV 112 N. Penn. Ave Mason City, IA 50401	advertising	5,525.
10/19/04	ID# CK# 1120	Auditor 220 N. Washington Mason City, IA 50401	labels	21.80
10/21/04	ID# CK# 1121	Postmaster Mason City, IA 50401	postcards	1,887.50
10/21/04	ID# CK# 1122	Auditor 220 N. Washington Mason City, IA 50401	disc, labels	102.85
10/22/04	ID# CK# 1123	Cleex Channel/KGLO 341 S. Yorktown Pike Mason City, IA 50401	advertising	2,824.00
10/22/04	ID# CK# 1124	Three Eagles/KLSS 402 19th St. SW. Mason City, IA 50401	advertising	1,792.00
10/22/04	ID# CK# 1125	KIMT-TV 112 N. Penn. Ave Mason City, IA 50401	advertising	773.50
SUB-TOTAL				\$ 13,744.15
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(f).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Bill Schickel

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/23/04	ID# CK# 1126	Candi Schickel 1443 E. State Mason City, IA. 50401	reimbursement for scale, copies, crimpers, staples	\$ 80.05
10/25/04	ID# CK# 1127	Clear Channel 341 S. Yorktown Pike Mason City, IA. 50401	advertising	1,967.70
10/25/04	ID# CK# 1128	Three Eagles 402 19th St. SW. Mason City, IA. 50401	advertising	1,792.00
10/25/04	ID# CK# 1129	On Media PO Box 1157 Mason City, IA. 50401	advertising	4,000.00
10/26/04	ID# CK# 1140	KIMT-TV 112 N. Penn Mason City, IA. 50401	advertising	691.00
10/25/04	ID# CK# 1138	Fed Ex Hwy 122 Exit Clear Lake, IA. 50428	delivery	17.25
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$8,548.00

TOTAL (if last page of this schedule) \$22,292.15

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

Page 2 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Bill Schickel

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/13/04	Republican Party of IA. 621 E. 9th Des Moines, IA. 50309		Printing	\$ 2,250.	
10/13/04	Republican Party of IA. 621 E. 9th Des Moines, IA. 50309		Postage	\$ 2,250.	

SUB-TOTAL \$ 4,500

TOTAL (If last
page of this
schedule) \$ 4,500

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)